

Kentucky Immunization Registry Information

The Kentucky Immunization Registry is a confidential, population-based, computerized system for maintaining information regarding patient vaccinations. The state registry is an optional program for providers to use. Not all providers use the registry at this time. School nurses can be setup to access the registry but if they are not employed by a LHD they will only be given 'view' access and that still allows them to print certificates.

For more information about the KY Immunization Registry or how to setup access to the registry, please contact customersupport@cdpehs.com or call 866-237-4814.

Individual Immunization Vaccine Data

All Kentucky schools complete an immunization survey each year to their local health departments and the Kentucky Department of Public Health (KRS 158.037 and 902 KAR 2:055). Schools may use the expandable immunization boxes to enter the dates the immunizations were administered to student. This data will not be collected by KDE, but will be useful to districts in completing the immunization survey from the Department for Public Health.

To assist with completing this survey, enter the data for the immunizations listed below.

Immunization requirements for the 2014-2015 school year include:

- DTAP Tdap, DT, Td
- IPV (Polio)
- MMR
- Hib
- Hepatitis B
- Varicella
- Meningococcal
- Pneumococcal Conjugate Vaccine (PCV)

Immunization Summary	
Diphtheria-tetanus-pertussis, combined [DTaP, DTP]	Non-compliant
Tetanus-diphtheria [Td]	Non-compliant
Polio [IPV, OPV]	Compliant
Measles-Mumps Rubella [MMR]	Compliant
Hepatitis B [Hep B]	Compliant
Hemophilus influenza, type B [Hib]	Compliant
Varicella	No Requirement

Immunization Certificate	
Date <input type="text" value=""/>	Expiration <input type="text" value="07/15/2013"/> Type <input type="text" value=""/>
<div> <div>+</div> <div> <div>+</div> <div>Diphtheria-tetanus-pertussis, combined [DTaP, DTP]</div> <div>Provisional</div> </div> <div> <div>+</div> <div>Tetanus-diphtheria [Td]</div> <div>Standard</div> </div> <div> <div>+</div> <div>Polio [IPV, OPV]</div> <div>Medical</div> </div> <div> <div>+</div> <div>Measles-Mumps-Rubella [MMR]</div> <div>Religious</div> </div> </div>	

Entering Immunization Dates

To ensure accuracy of compliance reports for the KY Department for Public Health, schools may use the expandable immunization boxes to enter the dates the immunizations were administered to student.

Note: All combination shots should be entered separately for each required immunization. For example, Pediatrix is a combination shot containing DTaP, Hep B and Polio. If Pediatrix is given, dates should be separately entered for each of three required immunizations.

Diphtheria-tetanus-pertussis, combined [DTaP, DTP]						
Shots	03/06/1992	05/13/1992	07/13/1992	07/13/1993	01/21/1997	
Waiver	<input type="text"/>					
Date:	<input type="text"/>					
Expires:	<input type="text"/>					

Steps to enter immunization information:

1. Open the section for the immunization by clicking the plus sign in front of the immunization if the shot fields are not visible.
2. Enter the dates the student has received their shots in the Shots fields. These dates can be entered in MM/DD/YYYY or MMDDYY format.
3. When finished entering shot dates, click Save at the top of the tab. This will refresh the Immunization Summary and indicate if the student is compliant or not based upon the logic loaded in Campus.

Diphtheria, Tetanus, Pertussis (DT, DTaP, DTP)

Diphtheria-tetanus-pertussis, combined [DTaP, DTP]						
Shots	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Waiver	<input type="text"/>					
Date:	<input type="text"/>					
Expires:	<input type="text"/>					

Waiver: Select from the dropdown menu the type of waiver for this immunization, if applicable.

- Medical
- Religious

Tdap (Tetanus, Diphtheria and Acellular Pertussis)

Tetanus, Diphtheria and Acellular Pertussis [Tdap]	
Shots <input type="text"/> <input type="text"/>	
Waiver <input type="text"/>	
Date: <input type="text"/>	
Expires: <input type="text"/>	

Waiver: Select from the dropdown menu the type of waiver for this immunization, if applicable.

- Medical
- Religious

TD Booster (Adult Td Vaccine, Boostrix)

Note: To be used only if student cannot receive Pertussis vaccine.

Tetanus-diphtheria [Td]	
Shots <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Waiver <input type="text"/>	
Date: <input type="text"/>	
Expires: <input type="text"/>	

Waiver: Select from the dropdown menu the type of waiver for this immunization, if applicable.

- Medical
- Religious

Polio (OPV or IPV)

Polio [IPV, OPV]	
Shots <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Waiver <input type="text"/>	
Date: <input type="text"/>	
Expires: <input type="text"/>	

Waiver: Select from the dropdown menu the type of waiver for this immunization, if applicable.

- Medical
- Religious

Meningococcal (Requirement for 6th grade entry)

Meningococcal	
Shots <input type="text"/> <input type="text"/>	
Waiver <input type="text"/>	
Date: <input type="text"/>	
Expires: <input type="text"/>	

Waiver: Select from the dropdown menu the type of waiver for this immunization, if applicable

- Medical
- Religious

Measles, Mumps, Rubella or measles containing vaccine (MMR), Measles, Mumps, Rubella and Varicella (MMRV) or ProQuad

Measles-Mumps Rubella [MMR]			
Shots	<input type="text"/>	<input type="text"/>	<input type="text"/>
Waiver	<input type="text"/>		
Date:	<input type="text"/>		
Expires:	<input type="text"/>		

Waiver: Select from the dropdown menu the type of waiver for this immunization, if applicable.

- Medical
- Religious

Hepatitis B

Hepatitis B [Hep B]			
Shots	<input type="text"/>	<input type="text"/>	<input type="text"/>
Waiver	<input type="text"/>		
Date:	<input type="text"/>		
Expires:	<input type="text"/>		

Waiver: Select from the dropdown menu the type of waiver for this immunization, if applicable.

- Medical
- Religious

Varicella (chicken pox vaccine)

Varicella			
Shots	<input type="text"/>	<input type="text"/>	
Waiver	<input type="text"/>		
Date:	<input type="text"/>		
Expires:	<input type="text"/>		

Waiver: Select from the dropdown menu the type of waiver for this immunization, if applicable.

- Medical
- Religious
- Hx/Dis – Select if student has had the chicken pox – No Vaccine Required

(Note, per 2012 changes to 902 KAR 2:060, Immunization Schedule, students must have medical provider's documentation of having had chicken pox to waive vaccine)

BMI Data Entry

Body Mass Index data is not a required data entry (702 KAR 1:160). However, some school districts may wish to enter BMI data as part of their district's wellness program.

To enter BMI data:

Select Screening Tab

On Screening Detail: Enter Date of screening and Appropriate Type

(Early Childhood, Child & Teen Check-up or Health Appraisal)

Select Height/Weight and Vital Signs and enter Date, Height and Weight.

The screenshot displays the OAS/DSS Immunization Data entry interface. The 'Screenings' tab is selected. The 'Screening History' table shows a single entry: 'Early Childhood' on '12/17/2007'. The 'Screening Detail' section shows the 'Date' as '12/17/2007' and the 'Type' as 'Early Childhood'. The 'Sports Physical' section is expanded, showing the 'Height/Weight and Vital Signs' sub-section. The 'Date' is '12/17/2007', 'Height' is '40 inches', 'Weight' is '45 lbs.', 'BMI' is '19.772', and 'BMI Percentile' is '97 %'. The 'Blood Pressure', 'Pulse', and 'Respiration' fields are empty.

Type	Date	Comments
Early Childhood	12/17/2007	

Date	Type	Comments
12/17/2007	Early Childhood	

Sports Physical					
Height/Weight and Vital Signs					
Date	Height	Weight	BMI	BMI Percentile	
12/17/2007	40 inches	45 lbs.	19.772	97	%
Blood Pressure		Pulse	Respiration		

BMI and BMI Percentile will automatically calculate when height and weight are entered.